



# "A STUDY OF AWARENESS OF AIDS AMONG COLLEGE GOING BOYS AND GIRLS IN SRINAGAR"

Mr. Shamas Ud-Din Ahangar

Sr. Assistant Professor, Govt. College of Education, M. A. Road Srinagar, J&K (India).

## ABSTRACT

Globally, AIDS is well documented as both a disease and a development problem. However, it was originally seen as an African and American problem, and thus most efforts to understand AIDS' socio- epidemiology and demography were focused on these two continents (and particularly on certain "high risk" populations within them). Unfortunately, now as the pandemic continues, it is showing itself to be a worldwide risk, not isolated in any specific geographic locations or "high risk" populations.

It has recently become evident just how susceptible Asia is to the AIDS epidemic. Although relatively late to feel the global epidemic Asia is now experiencing the worst spread of the disease of any continent. Many scientists predict that ultimately AIDS will affect more Asians than it does the population of any other continent (UNICEF 1993; Chin, 1995). In fact, it has been estimated that without effective prevention efforts now more than 55 million Asians could be infected by 2020 (Henry, 1994).

This paper tested the effectiveness of a low-cost, simple and short AIDS awareness study in Srinagar. It has been measured the level of HIV/AIDS knowledge among girls is more than boys.

**KEY WORDS:** Awareness, AIDS, College Going Students.

## Introduction

Asia does stand to benefit, however, from its relatively late entry into the struggle against AIDS. There have been many public health lessons learned in Africa, America and Europe (Choices, 1993). By acting on these lessons, Asia may be protected from some of the worst AIDS related tragedies that its neighbours have experienced and are experiencing still. Since now cure or vaccine exists to combat AIDS its prevention and management must be carried out at the behavioural and social level. Thankfully, the behaviour modifications needed to protect oneself from AIDS are clear, simple and well within the grasp of the majority of people worldwide. Why then is AIDS still being transmitted at a staggering rate? The knowledge, understanding, and motivating to change behaviour clearly must be lacking. Adolescents in India, account for one-fifth of the total population and are a significant human resource that needs to be given ample opportunity for holistic development towards achieving their full potential. Not only are needs of the adolescents related to their physical development, but also to their emotional and psycho-social development. Past research experience has shown that conducive environment facilitates holistic development of adolescents into mature and productive human resource and several negative influences, affecting the socio-cultural growth of adolescents, are preventable. Adolescent girls have their own developmental needs, which are peculiar to them and need to be addressed separately.

Recent studies have been taken up to evolve growth standards for the Indian adolescents, including adolescent girls. Research during past five years has shown that adolescent girls have better nutritional status, in terms of "weight-for-age" and body mass index (BMI) than adolescent boys, but there was a slow growth after 13-14 years age, leading to lowering of parameters below the Indian Council of Medical Research (ICMR) standard, which should be a cause of concern for the programme implementers and planners.

## Need and importance of the study

Increasing trends of non-communicable diseases is a worldwide phenomenon. Until now risk factors like high blood pressure, obesity, smoking, alcohol consumption, low physical activity, etc., contributing to the development of non-communicable diseases were more prevalent in the developed countries. AIDS which is spreading at a rapid growth needs to be paid more and more attention for its curing.

Knowledge about high risk behaviour is essential for AIDS prevention. Since no cure or vaccine exists to combat AIDS, its prevention and management must be carried out at the behavioural and social level. After AIDS awareness campaign, respondents' knowledge particularly had raised substantially. As a matter of fact the investigator thought it relevant to know the level of awareness about AIDS among college going boys and girls in Srinagar.

## Objectives

The broad objective of the study was to;

- 1). To study the AIDS awareness education among the college going boys and girls in district Srinagar.

- 2). To compare the AIDS awareness among the college going boys and girls in district Srinagar (Gender and Locality).

## Hypotheses

The following hypothesis has been formulated for the present investigation:

There is no significant relationship between the awareness of AIDS among college going boys and girls. (Gender)

1. There is no significant relationship between the awareness of AIDS among college going boys and girls. (Rural and Urban).

## Statement of problem

"A STUDY OF AWARENESS OF AIDS AMONG COLLEGE GOING BOYS AND GIRLS IN SRINAGAR"

## Methodology

The study was conducted in Srinagar district. The sample for the study was consisting 100 students (50=male and 50female) randomly selected from different colleges of the Srinagar district.

## Method

For the purpose of present study the Descriptive Method has been applied.

## Tool

For the purpose of present study a self- constructed questionnaire was prepared and applied as per the standard norms.

## Statistical treatment

The collected data was subjected to statistical analysis by applying

1. Percentage.
2. SD
3. t-test

## Analysis of Data

In order to achieve the objectives formulated for the present study, the data collected was statistically analysed by employing the treatment mentioned in the foregoing pages. Initial analysis was carried out about the awareness of AIDS knowledge among the respondents as under;

**Table 1: Distribution of Boys and Girls having knowledge and awareness of AIDS.**

S.NO	BOYS	GIRLS	PERCENTAGE
N=100	30	56	86%

Table 01 represents the basic responses to the AIDS of the total population of 100 respondents only 30 boys and 56 girls i.e. a total of 86% students have heard about the AIDS.

**Table 02: Awareness of causes of Aids disease in Boys and Girls.**

S.NO	BOYS	GIRLS	PERCENTAGE
N=100	20	29	49%

Table 02 Predicts about the awareness of causes of the AIDS disease. Out of the total population of 100 respondents only 20 boys and 29 girls i.e. a total of 49% students are aware about the causes of ADIS.

**Table 03: Prevention of Aids Awareness in Boys and Girls.**

S.NO	BOYS	GIRLS	PERCENTAGE
N=100	18	46	64%

The above table predicts that prevention of the AIDS disease. Out of the total population of 100 respondents only 18 boys and 46 girls i.e. a total of 64% students are aware about the ADIS prevention.

**Table 04: Showing mean comparison of male and female college going students on AIDS awareness.**

S. No	Group	Mean	SD	t-value	Level of significance
1	Male/female combined	52.45	4.16	6.34	Significant at 0.01 level
2	Male	55.43	4.67		
3	Female	43.33	5.71		

The above table shows that the calculated values depict that a significant difference has been found at 0.01 levels for values of male and female students (combined value) and scores of Male ones. Similarly, a significant difference has been found at 0.01 levels for values of female students

**Table 05: Showing mean comparison of rural and urban college going students on AIDS awareness.**

S. No	Group	Mean	SD	t-value	Level of significance
1	Rural/Urban combined	30.34	5.34	4.88	Significant at 0.01 level
2	Rural	36.43	5.31		
3	Urban	42.33	4.60		

The above table shows that the calculated values reveal that a significant difference has been found at 0.01 levels for values of rural and urban students (combined value), and scores of rural students. Similarly, a significant difference has been found at 0.01 levels for values of urban students

### Findings and Suggestions

#### Findings:

The study has revealed the following findings.

1. No of girls is more aware about the AIDS than boys;
2. The investigation has shown that more female students are aware about the causes of ADIS than boys.
3. It revealed that prevention of the AIDS. Out of the total population of 100 respondents only 18 boys and 46 girls i.e. a total of 64% students are aware about the ADIS prevention.
4. The research also reveals that there is a significant difference between the awareness of AIDS in boys and girls (gender) and rural and urban (locality)

#### Suggestions:

The following recommendations have been put forward for the future research programme:

1. Programs needs to organized in order to make students learning in different educational institutions about AIDS a dangerous disease;
2. Campaigns must be organized to provide important knowledge to common masses;
3. Necessary material in the form of booklets, pamphlets, posters etc must be circulated among the people;
4. The investigation must be conducted again on a large sample with various other variables.

### BIBLIOGRAPHY

1. Ahmed S. M., Chowdhury M., Bhuiya A., Final Report on 1st round Survey: Health.
2. Ahmed S.M., Mohsin M., Bhuiya A., Chowdhury A.M.R., Rana A.K.M.M., Baseline Survey Matlab, 1992: Final Report May 1994. Dhaka: BRAC;1994.
3. AIDS action, Asia-Pacific edition, issue 27, HAIN & AHRTAG, April-June 1995.

4. AIDS action, Asia-Pacific edition, issue 31, HAIN & AHRTAG, April-June 1996.
5. AIDS SAMACHAR (Bangla Newsletter) on AIDS Education, Prevention and Network, Number 2, Dhaka: VHSS; June 1996
6. Alabastro R., "AIDS virus could hit 20 mln. Asians by the year 2000 U.N.". Health & Medicine: AIDS/HIV, 15-Oct-1997.
7. Bhuiya A., Hanifi S.M.A., Hossain M, Aziz A., "Impact of AIDS awareness campaign on knowledge of AIDS in a remote rural area of Bangladesh." Chakaria project, Dhaka: ICDDR,B, 1997.
8. Bhuiya I., Hossain S.M.I., Streadfield K., "Situation of Blood Testing/Screening in relation to HIV/AIDS in Dhaka City." Regional Working Papers, No. 1. South & East Asia, Dhaka: The Population Council 1995.
9. Bloem M.A., Karim D. (Eds.), "HIV/AIDS and Mobility, Bangladesh." A Workshop Proceeding. Dhaka: Christian Commission for Development in Bangladesh, 1995.
10. Chowdhury M., Bhuiya A., Vaughn P., and Mahmud S. "Effect of socioeconomic development on health status and human well-being: proposal for phase II of the BRAC-ICDDR,B Matlab joint project 1996-2000 AD," Working paper no. 6, BRAC-ICDDR,B Joint Research Project, Dhaka, 1995.
11. Chowdhury M.R., Siddiquey S., Jesuthasan E., "HIV Prevention in Bangladesh." Dhaka: Institute of Epidemiology Disease Control & Research, 1992.
12. Fauveau Vincent. "Matlab: Women, Children and Health." Ed. ICDDR,B Special Publication No. 35. Dhaka: ICDDR,B, Dhaka, 1994.
13. Fransen L., Vandam C.J., Piot P., "Health Policy for Controlling AIDS and STDs in Developing Countries," Health Policy and Planning; 1991;6(2): 148-156.
14. Klouda T., Gordon G., Preventing A Crisis--AIDS and Family Planning Work. International Planned Parenthood Federation, Macmillan Publishers Ltd., 1989.
15. Mensa-Bonsu H.J.A.N., "AIDS and the Ghana Legal System: Absolute Ignorance or Denial Syndrome," Health Transition Review, 1995;5: 293-305.
16. National AIDS Committee, Bangladesh. Serosurveillance report, May, 1997. Shamikkhan (Bangla Newsletter) on AIDS, Vol. 2, October BIRPERHT, 1995.
17. UNAIDS. "The Status and Trends of the Global HIV/AIDS Pandemic." Final Report of XI International Conference no AIDS, July 5-6, 1996.
18. UPDATE AIDS, Newsletter of VHSS - STD/AIDS Network, Vol. 6, No. 2, VHSS, June - September 1996.
19. UPDATE AIDS, VHSS Newsletter on AIDS Prevention Programme, Vol. 4, No. 1, VHSS, January 1994.
20. VHSS. "HIV/AIDS, Transmission, Facts and Impacts in Bangladesh." In: In Touch, VHSS Health Newsletter, Vol.13, No.136, 1994.
21. ViravaidyaMechai, "Heading Off a Catastrophe." In: Reid Elizabeth (eds.). HIV/AIDS, The Global Interconnection. USA: Kumarian Press, 1995.